



A Guide to CHIP

The Children's Health Insurance Program



Healthy Kids Now!
ADVANCING THE WELL-BEING OF WASHINGTON'S KIDS

Medical Assistance Administration
A Guide to CHIP August 2003

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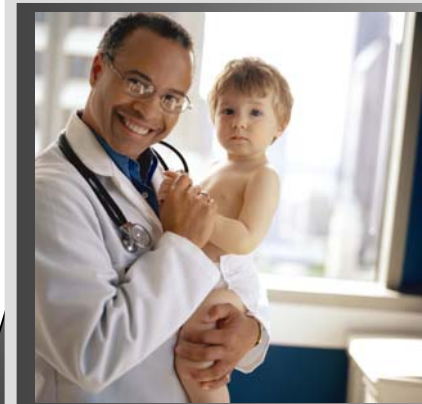
If you have questions, call our Medical Assistance helpline at 1-800-562-3022, Monday through Friday, 7am to 6pm. The TTY/TDD number (for people who have difficulties with hearing or speech) is 1-800-848-5429. The call is free.



Visit our web site at: <http://maa.dshs.wa.gov/CHIP/>

A Guide to CHIP

The Children's Health Insurance Program



What is CHIP?

CHIP stands for the Children's Health Insurance Program. CHIP is a federal and state program that covers children under age 19 in families whose income is too high for Medicaid but still fits within certain guidelines. Both Medicaid and CHIP are administered by the Department of Social and Health Services (DSHS). When you apply for CHIP, we consider your children for Medicaid first. If your children are not eligible for Medicaid because your income is too high, we then check to see if your income fits within the CHIP income guidelines. If your children are eligible for Medicaid, they are not eligible for CHIP.

When CHIP coverage begins

CHIP coverage begins the first day of the application month. For example, if we receive your application on March 21 and your children are found eligible, your children are covered beginning March 1.

Monthly premiums

CHIP has monthly premiums unless your children are American Indian or Alaska Native. You pay premiums to DSHS. You don't pay premiums to providers, such as doctors, pharmacists and dentists. If you have questions about your premium payment, call the Medical Assistance helpline at 1-800-562-3022.

Premiums are \$10 per child per month, with a \$30 family maximum per month. Even if you have 4 or more children enrolled, you will pay no more than \$30 per month in premiums.

If your income goes down and you cannot pay premiums, call 1-800-562-3022. Your children may be eligible for Medicaid, which has no premiums.

Billing for premiums

Each month you will receive a premium bill with the amount you owe for your children's health coverage. A return envelope is included for your convenience.

If your children's CHIP coverage ends, you will no longer be billed a monthly premium. However, you will continue to receive a monthly bill if you still have a balance due.

If you don't pay your premium

You need to pay your premiums to keep your children's CHIP coverage. If you don't pay your premium for 4 months, your children will be disenrolled from CHIP. You must then pay all past due premiums and wait 4 months before your child can be re-enrolled in CHIP. The waiting period begins the day after coverage ended. The waiting period ends on the last day of the fourth full month of non-coverage. For example, if your children's medical ended on March 31st, the end of the waiting period would be July 31st. The four full months of non-coverage are April, May, June, and July.

Six months of coverage

Your children are covered by CHIP for up to 6 months from the month you applied. This coverage may end during the 6 months if your children move out of state, turn 19 years old, your income goes up, or monthly premiums are not paid.

Before your children's CHIP coverage ends, you will receive an eligibility review form from DSHS. You will need to complete the review form and return it to DSHS to see if your children are eligible for another 6 months of CHIP.

If at any time your family income goes down or a child under 19 becomes pregnant or disabled, your children may be eligible for Medicaid. Medicaid offers the same services as CHIP with no premiums. Please call 1-800-562-3022 if you have a change.

How your children will get care

After your children are on CHIP, you will need to decide how they will get health care. The way your children get their health care depends on what is available in your county. You will receive a Healthy Options packet in the mail to help you decide how your children will get health care. You need to fill out the enrollment form in the Healthy Options packet as soon as you receive it. There is more information on the types of health care coverage on page 3 of this guide. If you have any questions, call the Medical Assistance helpline at 1-800-562-3022.

Managed care and fee-for-service

Managed care and fee-for-service are two different ways to get health care. The way your children get their health care depends on what is available in your county. See your Healthy Options packet for information on what is available in your county or call the Medical Assistance helpline at 1-800-562-3022. Below we talk about managed care and fee-for-service.

Managed care

Managed care offers most medical care through one source: a health plan. A health plan is a health insurance company. DSHS contracts with health insurance companies to make health care available to your children through CHIP. These plans all offer the same medical services. However, they have their own team of doctors, specialists, pharmacies, health care providers, and hospitals.

If your children are in a managed care health plan, they go to one person for their medical care called a Primary Care Provider. A Primary Care Provider is the doctor, nurse practitioner, or physician assistant who takes care of your children to make sure they get all of the health care they need. Your Primary Care Provider knows your children's medical history and will send you to a specialist and other services when needed. If you need to see a specialist or have tests, your Primary Care Provider will refer you. If you get care without a referral or go to a doctor, pharmacist, or other provider who doesn't work with your plan, you can be asked to pay for the services you receive.

Whichever health plan you choose, your children will receive the care they need to stay healthy and the care they need when they are sick. This includes well child exams, diagnostic tests, and treatment.

Fee-for-service

With fee-for-service you don't belong to a health plan. You can go to any doctor, pharmacist, or other provider who will take your children's medical ID card for payment. To find these providers, you need to call and ask if they will take your children's medical ID card. You don't need a referral from another doctor to get care. Sometimes it is not easy to find providers who will take your medical ID card. If you go to a provider who won't take your card, you must pay for the services you get.



American Indian and Alaska Native children

American Indian or Alaska Native children have 3 ways to get medical care. You can:

1. Sign up for a health plan, if one is available in your county, and get your children's health care from the doctors and other providers who are part of that plan.
2. Sign up for a Primary Care Case Manager Indian Health Service, Tribal, or urban clinic. A list of Primary Care Case Manager clinics and health centers is in your Healthy Options packet you will be receiving in the mail soon.
3. Choose fee-for-service. This means that you do not have to sign up for a health plan or a Primary Care Case Manager clinic. If you choose fee-for-service, you can go to any doctor or other provider who agrees to take your children's medical ID card.

If you also have children who are not American Indian or Alaska Native, you can sign them up for the same Primary Care Case Manager if the Primary Care Case Manager says it is okay.

Changing how your children get care

If you live in a county where you have a choice between one health plan and fee-for-service, you can change how your children get care. If you live in a county with two or more managed care plans you can change between these health plans. Fee-for-service is not an option when you live in a county with two or more plans. To find out more or change how your children get care, call the Medical Assistance helpline at 1-800-562-3022.

If you move

If you move, call the Medical Assistance helpline at 1-800-562-3022. Also, if your children are enrolled in a managed care plan, call and give the plan your new address. If you move out of your county, you may have to change how your children get their care depending on what is available in that county.



Your medical ID card

You will receive a green and white medical ID card every month. Please check every month to make sure it has the right information. For example, make sure your name and address are correct and the way you chose to get care for your children is right. Bring this card with you to all of your children's appointments (doctors, vision, dental) and when you pick up their prescriptions. Your children may not get health care or you may not be able to fill your children's prescriptions if you do not have this card with you. If your children need medical care before you get this card, call the Medical Assistance helpline at 1-800-562-3022.

What information is on your medical ID card?

Children who can use this card are listed here. If names or birthdays are wrong, call 1-800-562-3022.

If you have other insurance, the information is shown here.

Your children's card is good for these dates. If you don't get your new card sometime during the first week in the month, call 1-800-562-3022 right away.

Please read the back of this card.

P.O. BOX 45531
OLYMPIA, WA 98504-5531

MEDICAL IDENTIFICATION CARD
This Card Valid From: 10-01-01
To: 10-31-01
9 27 01

PATIENT IDENTIFICATION CODE (PIC)			MEDICAL COVERAGE INFORMATION									
Initials	Birthdate	Last Name	TB	Insurance	Medicare	HMO	Detox	Restriction	Hospice	CD Clerk	Other	
JD	010171	DOE	A									
RC	121296	DOE	A									

JANE D. DOE
114 MAIN STREET, APT. 56
VANCOUVER, WA 98685

SHOW TO MEDICAL PROVIDER AT TIME OF EACH SERVICE
DSHS 13-030(X)ACES(04/95)

SIGNATURE (Not Valid Unless Signed)

PLAN

CHIP
076 007308085
R000117347

1-800-PLAN

If your address changes, call 1-800-562-3022 right away.

These initials show your children are on CHIP.

If you chose a health plan, the plan name and phone number are in two places.

This is your children's case number. We ask for this whenever you call us.

Health plan ID card

If you enroll your children in a health plan, you will also get an ID card from the plan. You need both cards for medical appointments and when you pick up prescriptions. Your children may not get health care or their prescriptions if you do not have these cards with you. If you need care before you get your plan card, call the Medical Assistance helpline at 1-800-562-3022. They will tell you what to do to get care.

Covered services

CHIP has the same benefits whether your children are enrolled in a managed care health plan or whether they are fee-for-service. Below are some services available from CHIP. If your children are in a managed care health plan, they will get these services through the plan. If they are fee-for-service, you will need to find your own doctors and other providers.

- Ambulance
- Urgent or Emergent Care
- Eye exams
- Well child checkups
- Home health care
- Hospital care
- Immunizations (shots)
- Lab services
- Maternity care
- Medical supplies & equipment
- Office visits
- Oxygen/Respiratory therapy
- Pharmacy/Prescriptions
- Physical therapy, occupational therapy, speech therapy
- Surgery
- Specialty care
- X-rays



Other CHIP medical services

For these services it doesn't matter if your children are in a managed care health plan or fee-for-service. Managed care health plans do not cover these services, but your medical ID card does. Just make sure the provider you pick will take your medical ID card. Some of the services are available through your local health department or a family planning clinic.

- Community Mental Health Centers
- Dental
- Eyeglasses & fitting
- Family planning services and birth control
- First Steps services including: Maternity Support Services and Maternity Case Management
- Hearing aids
- Pregnancy terminations
- Substance abuse services

Specialist care

Managed care. For most services, you need a referral from your Primary Care Provider before your child can see a specialist. Do not go to another doctor without talking with your Primary Care Provider. If you do not have your Primary Care Provider's approval, you may have to pay for the visit.

Fee-for-service. With fee-for-service, you do not need a referral to see a specialist. Your children can go to any specialist who will take the medical ID card. If you go to a specialist who does not take your card, you will be asked to pay for the service.

Dental care

Dental care includes cleanings, x-rays, fillings, and extractions. You will need to find a dentist that takes your medical ID card. In some counties, it may be hard to find dentists who will take your medical ID card. If you don't already have a dentist, we suggest you:

- Ask friends who their dentists are.
- Ask your doctor.
- Call your local health department.
- Ask your health plan if they have names of dentists.
- Call your county dental association.
- Call the Medical Assistance helpline to see if they have a dentist in your area who may take your child.

EPSDT

EPSDT stands for Early and Periodic Screening, Diagnosis and Treatment. EPSDT is a preventative health program for children and teens. With this program, children and teens get regular checkups to make sure they get the immunizations (vaccinations) and other preventative care they need to catch any health problems at an early stage.

An EPSDT checkup should be done as soon as possible after your children become eligible for medical coverage. Call your doctor to schedule an appointment.

Family planning services for teens

- Teens may get free over-the-counter birth control from any pharmacy that accepts the medical ID card. You don't need a prescription to get over-the-counter birth control. You can get it just by showing your medical ID card.
- Teens are also eligible for medical care services, including all birth control methods, to take better care of their health and have more control over their lives by avoiding unintended pregnancies.

You can get information about Family Planning services and locations of family planning medical providers by calling the **Family Planning Hotline** at: 1-800-770-4334.

Transportation services

Your children can get medical transportation services through CHIP. We can help get a bus pass or a ride to and from medical visits. We can also help with volunteer drivers and vans that have wheelchair lifts. Or, if you already have a ride, we can help pay for gas or mileage. If you need help with transportation to your children's medical visits, call the Medical Assistance helpline at 1-800-562-3022.

Interpreter services

Your children can get medical interpreter services through CHIP. A medical interpreter can help you talk with your doctor if you don't speak English, are blind, are deaf or have problems hearing. If you need a medical interpreter, tell your doctor's office when you make your appointment. The doctor's office will get an interpreter for you.

Medical services in other states

Can you get medical services in other states? In nearly all cases, children who are on CHIP must get their medical care within the state of Washington. There are a few exceptions where we will pay for care received in other states:

1. Urgent or emergent care: only if you get the emergency care from doctors, dentists, or other providers who accept your medical ID card.
2. Routine (non-emergency) care: if the care you get is something we would normally pay for but is hard to get in Washington, and you get approval ahead of time. For more information, call the Medical Assistance helpline at 1-800-562-3022.
3. If you live near the state border, Medical Assistance may pay for care you get in Idaho or Oregon. If you live near the border of Canada, call the Medical Assistance helpline at 1-800-562-3022, to talk about your situation.

Emergencies

An emergency is when someone has a serious medical problem and needs care right away—when someone might die or be disabled if they don't get care right away.

If your children have an emergency, call 911 or go to an emergency room. Call your doctor when you go to an emergency room, and go back to your doctor for follow-up care after an emergency room visit.

Problems or complaints

If there's a problem with your children's medical care, we suggest you talk with your doctor first. If that doesn't work and your children are with a health plan, then call their plan and file a complaint (also called a grievance). If the problem still isn't solved, call the Medical Assistance helpline at 1-800-562-3022.

If you are fee-for-service you have a right to ask for a fair hearing when your children's medical is denied, ends, delays or limits medical care. Write to: Office of Appeals, Department of Social and Health Services, PO Box 2465, Olympia, WA 98507-2465.



Your rights and responsibilities

What are your rights?

- **Getting care.** You have the right to get the care that is covered by CHIP in a timely way. You have the right to get an opinion from another doctor if you are not sure about your doctor's treatment. You have the right to refuse treatment and be told what may happen if treatment is not received.
- **Being treated with dignity, respect, and fairness.** You have the right to receive care without discrimination of any kind. You can get help with language, communication, or physical barriers you may face. This includes having written notices or information translated into the language you read, and getting help from a medical interpreter if you need it because you don't speak English or have difficulties with hearing or speaking. It also includes getting help with transportation or medical appointments if you need it.
- **Making complaints.** You have the right to file a grievance or ask for a Fair Hearing at any time and get a timely answer (*see page 9, Problems or complaints*). You will not be discriminated against because you have complained.

What are your responsibilities?

- **Help your doctor give you the care you need.** You must always bring your medical ID card to all appointments and you must always tell the provider that you are a CHIP client. Help the doctor get copies of your previous medical records. Ask questions about anything you don't understand. Call your doctor when you go to an emergency room, and go back to your doctor for follow-up care after an emergency room visit.
- **Please be courteous about your appointments.** Be sure to call the doctor's office if you will miss an appointment, or will be late, so that other patients can use the time that was reserved for you.
- **Help keep your records up to date.** Let your doctor and DSHS know if you have other medical insurance besides CHIP. Call 1-800-562-3022 if you move, your family situation changes, or if you have medical insurance other than CHIP.
- **If you have problems:** Let your doctor know if you are unhappy with the care you are getting.

Discrimination is prohibited in all programs and activities. No one shall be excluded on the basis of race, color, national origin, sex, age, religion, creed, or disability.